



Graham Fire-Rescue

Firefighter/EMT

The City of Graham is accepting applications for Firefighter/EMT position.

Graham Fire-Rescue is a single station, combination department serving the 8 square miles of the City of Graham and 803 square miles of Young County. The department consists of the Fire Chief, Assistant Chief, and twelve operations personnel on a 24/48 shift schedule.

Graham Fire-Rescue responds to all Fire, Rescue and EMS (first responder) calls within the city limits of Graham, and the department also responds to all structure fires, vehicle accidents and rescue incidents within an 803 square mile jurisdiction of Young County. A department Rescue Dive Team also serves Possum Kingdom Lake & Lake Graham.

All interested applicants should complete the application provided at the link below. Return the completed application via email to fire7435@gmail.com or in person. Any questions should be directed to Chief Laurent by phone or email during normal business hours Monday-Friday.

815 First Street, Graham, Texas 76450
940-549-4013

fire7435@gmail.com

https://www.cityofgrahamtexas.com/wp-content/uploads/2021/08/APPLICATION_FOR_EMPLOYMENT.pdf

Anyone actively working to become certified is encouraged to apply!

Minimum Qualifications:

- High School Diploma
- T.C.F.P. Basic Structure Firefighter
- T.D.S.H.S. EMT-Basic

Compensation & Benefits:

Base Salary: \$38,630.80
Plus Additional Built-In
OT Compensation

TMRS with 2:1 City Match

City Provided Health
Insurance

Vision & Dental Insurance
Available at Group Rate

Vacation & Holiday Time
Accrued

Certification Courses &
Pay Available

Additional Requirements:

Ability to obtain and
maintain Class B driver's
license.

Respond to 20% of callback
incidents.

Residency must be
established within 20
minutes of the fire station
on or before 6 months from
date of hire.

Date: _____

City of Graham
429 Fourth Street
PO Box 1449
Graham, Texas 76450
(940) 549-3324

APPLICATION FOR EMPLOYMENT

Please print in ink or use typewriter. Attach extra sheets of paper when necessary. Read carefully and answer all question completely.

Position or department applying for: _____

APPLICANT INFORMATION:

Name: _____ Social Security #: _____

Current Address: _____

Telephone number: Home # _____ Cell # _____

Are you authorized to work in this country? () yes () no

Driver's License Type: _____ Number: _____ State of Issue: _____

Residences: List all address where you have lived during the past 3 years, beginning with the present. List date by month and year.

Military Record:

Have you served in the U.S. Armed Forces? () yes () no

Date of Service: From _____ To _____ Branch _____

Highest Rank Held: _____ Type of discharge: _____

EDUCATION:

Did you complete high school or G.E.D. ? () yes () no

High School Attended

City & State

Graduated

College/University attended: _____

Units Completed _____ Major/Minor _____ Degree received: _____

List other schools attended (trade, vocations, business) give name and address, dates attended, course of study, and other pertinent information.

SPECIAL QUALIFICATIONS:

List any specialized equipment or machinery which you can operate:

List names of any professional organization of which you are a member: _____

CONVICTIONS, DETENTIONS, AND TRAFFIC RECORD

Specify all convictions and nature of offense:

Has your driver's license ever been suspended or revoked? () yes () no

List all traffic citations you have received excluding parking tickets:

WORK HISTORY: Beginning with your present or most recent job, list all employment, including part-time, temporary or seasonal employment. Include all periods of unemployment.

YOU MUST COMPLETE ALL BLANKS WITH INFORMATION REQUESTED.

May we contact your present employer? () yes () no

From _____ To _____ Employer _____
Address (number/street/city/state/zip) _____

Phone number _____ Job Title _____
Supervisor _____ Reason for leaving _____

From _____ To _____ Employer _____
Address (number/street/city/state/zip) _____

Phone number _____ Job Title _____
Supervisor _____ Reason for leaving _____

From _____ To _____ Employer _____
Address (number/street/city/state/zip) _____

Phone number _____ Job title _____
Supervisor _____ Reason for leaving _____

PERSONAL REFERENCES: give name, address, and phone number of three persons other than relatives, who have knowledge of your character, experience, or ability:

CERTIFICATION

I hereby certify that the statements in the application are true and correct. I realize that they will be investigated and thereby authorize the release of any pertinent and appropriate information from my past employer and personal references. I understand that misrepresentations on my part in completing this application will cause my application to be rejected at anytime before or after my possible employment with the City of Graham.

I understand that this application is not an employment agreement, and that no employment is being offered to me in this application. If I am offered employment, I understand that under the at-will doctrine the City is allowed to change my wages, benefits, and other conditions of employment at any time. I also understand that under the at-will doctrine, I may terminate my job with the City at any time for any reason.

Signature of Applicant: _____ Date: _____

Return applications to: City of Graham
429 Fourth Street
Graham, Texas 76450